

ISSUE SLIP STAPLE AREA (for ~~any~~ ~~use~~ cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	ST	691001	10/28/99
O.I.P.E. CLASSIFIER			5/11/99
FORMALITY REVIEW	QW	644830	11-16-89

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date									
Final	Original	13	01	03	05	07	09	10	12	2
1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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26	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
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If more than 150 claims or 10 actions  
staple additional sheet here

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